Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
Boiler and Machinery		
9. Fire		
10. Extended Coverage	<u> </u>	
11. Inland Marine	<u> </u>	
12. Homeowners	#5 000 474	4.00/
13. Commercial Multi-Peril	\$5,628,174	4.9%
14. Crop Hail		
15. OtherLine of Insurance		
Line of insurance		
Does filing only apply to certain territory (terri	itories) or certain classes? If so, speci	fv: No
2000 mmig ormy apply to contain terms y (term	, -, -, -, -, -, -, -, -, -, -, -, -, -,	
Brief description of filing. (If filing follows rate	s of an advisory organization, specify	organization): Filing of 2005 rates for
use with the Precision America and Precision	Premier Programs.	
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level which	n will result from application of new rat	es.
	_	
	Assura	ance Company of America
		Name of Company
		Product Analyst



SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		ctive All policies ef	All policies effective on or after 6/1/05	
	(1) <u>Coverage</u>	(2) Annual Premiun <u>Volume (Illinois</u>)		(3) Percent hange (+ or -)**
		· · · · · · · · · · · · · · · · · · ·	_	
1.	Automobile Liability			
	Private Passenger			
	Commercial			
2.	Automobile Physical Damage			
	Private Passenger			
	Commercial			
3.	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage	•		
11.	Inland Marine			_
12.	Homeowners			
13.	Commercial Multi-Peril	\$229,998	-12.4%	
14.	Crop Hail	0225,550	12.170	.
15.	Other			
13.	Line of Insurance			
	s filing only apply to certain territory (te			on):
			Desire - Our - Desire -	These shapes will
	th this filing it is our intent to submit the follow ult in an overall impact is -12.4%.	ing rate revisions to apply to our	Business Owners Program.	i nese changes will
The For sep and Pre g.,	e revisions are as follows: Revise base rates rms, Coverages and Limits, 4. Liability and Monarate charge as this charge is now included in hual gross sales limit eligibility cap from \$3M temium Computation d. Property Deductible Othis rule is clarified to indicate the Increased lisk and Owners.	edical Expenses Coverage b. 3. in base rate, revised rule 22. Elig to \$5M, revise deductible factors otions, editorial Change to Rule	Druggists Professional Liabil gibility 2. Business Personal I i included in Rule 23. Premiu 23. Premium Development D	ity removing the Property c. revised m Development D. D. Premium Computation
	DIVISION OF IN	SURANCE	Harleysville Insu	rance Company
	DIVISION OF IN STATE OF ILLING	IS/IDFPR	Name of 0	
	144.000	205		
	JAN 282	UU5 (
	ı			y Walter
	000000	. 1	State Fil	ng Analyst
	SPRINGFIELD,	ILLINOIS	Offici	al - Title
H29	219D			

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level Renewal Business	produced by rate revision effective 03/01/0	05 New <u>Business; 05/01/05</u>
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Suretý <u> </u>		
Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	\$8,798,923	-4.9%
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terri		
use with the Precision America and Precision		
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	· ·	
		Casualty Company
		me of Company
		oduct Analyst
	(Official - Title

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR RECEIVED

JAN 1 1 2005

SPRINGFIELD, ILLINOIS

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate legenewal Business	vel produced by rate revision effective 03/01/05	New Business; 05/01/05
(1) Coverage	(2) Annual Premium Volume (Illinoi s)*	(3) Percent Change (+ or -)**
<u>Coverage</u>	<u>volume (minors)</u>	Gridingo (· Oi -1
Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril	\$980,877	-4.9%
14. Crop Hail		
15. OtherLine of Insurance		
Line of Insurance		
Does filing only apply to certain territory (erritories) or certain classes? If so, specify: No	
		· · · · · · · · · · · · · · · · · · ·
Brief description of filing. (If filing follows ruse with the Precision America and Preci	ates of an advisory organization, specify organi sion Premier Programs.	•
*Adjusted to reflect all prior rate changes.		
**Change in Company's premium level wl	nich will result from application of new rates.	
	Northern Insurance	e Company of New York
		e of Company
	 .	Lucat Amelius
		uct Analyst ficial – Title
	Oil Oil	noidi — Tiud

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JAN 1 1 2005

SPRINGFIELD, ILLINOIS

SUMMARY SHEET

	Change in Company's premium or ra	te level produced by rate revision effective	3/1/05
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		<u> </u>
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		4.000/
13.	Commercial Multi-Peril	11,339,844	-4.22%
14.	Crop Hail		
15.	Other		
	Line of Insurance		
_	-	to the Alamanatain alamana 16 an amari6a.	
	• • • • • • • • • • • • • • • • • • • •	erritories) or certain classes? If so, specify:	
_N/A			
ъ. с	1 CET - GEETING Colland	a veter of an advisory avgorization apolity	organization):
Brief	description of filing. (If filing follow	s rates of an advisory organization, specify of arolina (SICSC) proposes to change their pa	organization).
Selec	managed Property Commercial Autor	nobile and General Liability Lines of Busine	need modification factors for
Com	merciai Property, Commerciai Autor	moone and General Elability Lines of Busine	.55.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.



Selective Insurance Company of South Carolina

Name of Company

Krista M. Thompson

Krista M. Thompson, AIS State Filing Analyst Official - Title

H29219D